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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number DECLARATION FOR UTILITY OR First Named Inventor DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date Declaration Declaration Submitted Submitted after Initial Art Unit With Initial Filing (surcharge (37 ČFR 1.16 (e)) Filing **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Fastener for Air Bags and Other Uses (Title of the Invention) the specification of which is attached hereto was filed on (MM/DD/YYYY) as United States Application Number or PCT International PCT/AU2004/ (if applicable). **Application Number** and was amended on (MM/DD/YYYY) 000371 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Foreign Filing Date Priority Certified Copy Attached?** Prior Foreign Application Country (MM/DD/YYYY) **Not Claimed** Number(s) 2003 901352 March 24,2003 ΑU Ochober 15, 2003 2003 905 644 Aυ

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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PTO/SB/01 (04-05)

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#### **DECLARATION** — Utility or Design Patent Application

correspondence to:	e address sociated with stomer Number:		OR Correspondence address below	
Name Heather A. Wakef	ield			
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Chicago	,	State Illinois	ZIP 60610	
Country	Telephone 312-46		Email t. Wakefield@tz.net	
and belief are believed to be	true; and further that these de are punishable by fine or ir	e statements were made v nprisonment, or both, under	at all statements made on information with the knowledge that willful false 18 U.S.C. 1001 and that such willful on.	
NAME OF SOLE OR FIRST IN	VENTOR:	A petition has been filed for	or this unsigned inventor	
Given Name (first and middle [if	fany])	غ ا	me or Surname	
Dickory		I Ru	deluck	
Inventor's Signature  THE MAN THE STATE OF T	yryw-,		Pate 9/22/05	
Residence: City Chicago	State IL	Country	Gitizenship Australia	
Mailing Address 680 N. Lake	Shore Drive	, Unit 1400	a	
Chicago	State 	Zip   606	Country USA	
NAME OF SECOND INVENTO	R:	A petition has	been filed for this unsigned inventor	
Given Name (first and middle [if		'	Family Name or Surname	
Michael John	Laybourne	Ho		
Inventor's Signature	J		Date	
Residence: City	State	Country	Citizenship	
Mailing Address				
City	State	Zip	Country	
		·		
Additional inventors or a legal rep	presentative are being named on the	supplemental sheet(s) l	PTO/SB/02A or 02LR attached hereto.	

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DECLARATION		ADDITIONA Supplemental	AL INVENTOR(S) Sheet	Page 3 of 3
Name of Additional Joint Inventor, if an	y:	A petition	n has been filed for this u	nsigned inventor
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Nicholas Anthony		Ng		
Inventor's Signature				9 /23/05 Date
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Residence: City	State		Country	Citizenship
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City	State		Zip	Country
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Geoffry David		Sizer		
Inventor's Signature				Date 9/23/05
Chicago Residence: City	IL State		USA Country	Australia Citizenship
540 N State St, Apt 4801	1 31010		1 Country	Chiledionip
Mailing Address				
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Chicago City	IL State		60610 Zip	Country

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Filing Date	
First Named Inventor	Rudduck
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	DA020/CL 144/66

I hereby revoke all previous powers of attorney given in the above-identified application.			
I hereby appoint:			
	ed with the Customer Number:		
Practitioner(s) named to	below:	,	
	Name	Registra	ation Number
Heather	A. Warefield	53,732	
as my/our attorney(s) or agen Trademark Office connected t	nt(s) to prosecute the application identified therewith.	above, and to transact all busing	ness in the United States Patent and
Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:  OR  The address associated with Customer Number:			
OR Firm or Individual Name Address	Heather A. Wake	field	
Address	360 N. LaSelle S	reet, Suite	1100 B
City	Chicago	State IL	Zip 606 10
Country	USAU		
Telephone  312 - 464 - 1500  Email H. Walefield @ +2.nct  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
		nt or Assignee of Record	
Signature	was misur	•	Date 9/22/05
Name Dic	Kory Rudduck		Telephone 312-464-1500
Title and Company Chief Technoligal Officer Telezugology, Inc.			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
*Total of B4	_ forms are submitted.		

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Application Number	
Filing Date	
First Named Inventor	Budduck
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	DA020/CL 144/6/6

I hereby revoke all previous powers of attorney given in the above-identified application.			
I hereby appoint:			
Practitioners associated with the Co	ustomer Number		
OR			
Practitioner(s) named below:			
Name		Registration Num	ber
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as my/our attorney(s) or agent(s) to prose Trademark Office connected therewith.	cute the application identified abo	ve, and to transact all business in th	e United States Patent and
Please recognize or change the correspor	ndence address for the above-ide	ntified application to:	
The address associated with the	above-mentioned Customer Num	ıber:	
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OR Firm or			
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I am the:			
Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Signature #P/		Date 0	9/23/65
1.55	4c Arthur	Telephor	ne 312-464-1500
Title and Company Manager, Telezygology, Inc.			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
*Total of forms are submitted.			

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Application Number	
Filing Date	
First Named Inventor	Pudduck
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	DA020/CL 144/66

I hereby revoke all previous powers of attorney given in the above-identified application.			
I hereby appoint:			
1	ciated with the Customer Number:		
OR			_
Practitioner(s) nan	ned below:		
	Name	Registration N	umber
Heather	A. Wakefield	53.722	
neut voi	n. wateres	35) 152	
as my/our attorney(s) or a Trademark Office connect	agent(s) to prosecute the application identified ted therewith.	l above, and to transact all business in	the United States Patent and
Please recognize or char	nge the correspondence address for the above	e-identified application to:	•
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OR	sociated with the above-mentioned Customer	Nulliber.	
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The address associated with Customer Number:  OR			
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Telephone 312-464-1500 Email H. Wakefield @ tz.net			
Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Signature	W450/2	Date	9/13/0>
Name	Nicholas Na	Telepi	hone 312 - 731 -8579
Title and Company Marager, telezygology, Inc.			
NOTE: Signatures of all the inventors of assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
*Total of	<u></u> forms are submitted.		

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Application Number	THE THE SERVICE OF TH	
Filing Date		
First Named Inventor	Rudduck	_
Title		
Art Unit		
Examiner Name		
Attorney Docket Number	PA020/CL 14466	

I hereby revoke all previous powers of attorney given in the above-identified application.		
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Bookilloness accessisted with the Contemps Number		
Practitioners associated with the Customer Number:  OR		
Practitioner(s) named below:		
Name	Registration Number	
Heather A. Wakefield	53, 732	
Hearing A. Marentia	33, 152	
as my/our attomey(s) or agent(s) to prosecute the application identified a Trademark Office connected therewith.	above, and to transact all business in the United States Patent and	
Please recognize or change the correspondence address for the above-	identified application to:	
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OR	tuniser.	
The address associated with Customer Number:		
OR		
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City Chicago Country USA	State IL Zip 606 10	
Telephone 312 - 464 - 1500	Email H. Wakefield@ tz.net	
I am the:		
Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
, SIGNATURE of Applicant or Assignee of Record		
Signature Date 9/B/05		
Name Creoffed Sizur	Telephone 312-731-8576	
Title and Company General Manager, Telezygology, Inc.		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
*Total of forms are submitted.		

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